## The Maryland Healthy Kids Program Schedule of Preventive Health Care

Components		Infancy (months)									hildho	ood	Late Childhood (years)						Adolescence (years)								
Health and Developmental	0-1	2	4	6	9	12	15	18	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16	17	18	19-20	
Medical and Family History/Update	X	<b>♦</b>	•	•	•	X	•	•	X	_		$\rightarrow$	X	—				$\rightarrow$	X	_						$\rightarrow$	
Perinatal History	X	•	•	•	•	•	•	•																			
Psychosocial History/Update	X	•	•	•	•	X	•	•	X	_		$\leftarrow$	X	_				$\rightarrow$	X							$\rightarrow$	
Developmental Assessment	X							$\rightarrow$	X			$\rightarrow$	X	—				$\rightarrow$	X							$\rightarrow$	
Mental Health Assessment										X		$\boldsymbol{\longleftarrow}$	X	_				$\rightarrow$	X							$\rightarrow$	
Substance Abuse Assessment																			X							$\rightarrow$	
Physical Exam	0-1	2	4	6	9	12	15	18	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16	17	18	19-20	
Systems Exam	X							$\rightarrow$	X			$\rightarrow$	X	—				$\rightarrow$	X							$\rightarrow$	
Vision/Hearing Assessments <sup>1</sup>	S	S	S	S	S	S	S	S	S	S	О	О	О	S	S	S	S	S	0	S	S	О	S	S	О	S	
Oral/Dental Assessment	X							$\rightarrow$	X	_		$\leftarrow$	X	—				$\rightarrow$	X							$\rightarrow$	
Nutrition Assessment	X							$\rightarrow$	X			$\rightarrow$	X	_				$\rightarrow$	X							$\rightarrow$	
Measurements & Graphing: Ht-Wt-HC <sup>2</sup>	X							$\rightarrow$	X			$\rightarrow$	X	_				$\rightarrow$	X							$\rightarrow$	
Blood Pressure										X		$\rightarrow$	X	_				$\rightarrow$	X							$\rightarrow$	
At Risk Assessments by Questionnaire	0-1	2	4	6	9	12	15	18	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16	17	18	19-20	
Lead Assessment by Questionnaire				X	X	X	X	X	X			$\rightarrow$															
Tuberculosis *						X	•	•	X			$\rightarrow$	X	_				$\rightarrow$	X							$\rightarrow$	
Heart Disease/Cholesterol *									X	-		$\rightarrow$	X					$\rightarrow$	X							$\rightarrow$	
Sexually Transmitted Diseases (STD)*																			X							$\rightarrow$	
Laboratory Tests	0-1	2	4	6	9	12	15	18	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16	17	18	19-20	
Hereditary/Metabolic Hemoglobinopathy	X	•	•	•																							
Blood Lead Test						X	•	•	X	•	•	•															
Anemia Hgb/Hct						X	•	•	X	•	•	•															
Immunizations	0-1	2	4	6	9	12	15	18	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16	17	18	19-20	
History of Immunizations	X							$\rightarrow$	X	_		$\rightarrow$	X	—				$\rightarrow$	X	_						$\rightarrow$	
Vaccines Given per Schedule	X	X	X	X	•	X	X	•	•	•	•	•	•	•	•	•	•	•	•	•	•	•	•	•	•	•	
Health Education	0-1	2	4	6	9	12	15	18	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16	17	18	19-20	
Age-appropriate Guidance	X							$\rightarrow$	X			$\rightarrow$	X					$\rightarrow$	X							$\rightarrow$	
Education/Referral for Identified Problems	X							$\rightarrow$	X			$\rightarrow$	X					$\rightarrow$	X							$\rightarrow$	
Dental Referral									X	-		$\rightarrow$	X					$\rightarrow$	X							$\rightarrow$	
Scheduled Return Visit	X							$\rightarrow$	X			$\rightarrow$	X					$\rightarrow$	X							$\rightarrow$	

## KEY:

X = Required

 $\rightarrow$  = Continued requirement

= Required if not previously done

= Subjective assessment required

= Objective testing recommended

= Counseling/testing required if positive assessment

These minimum standards are required for all Maryland Medicaid recipients from birth to 21 years of age. The Maryland Healthy Kids Program requires yearly preventive care visits between ages 2 years through 20 years. However, based on the provider's professional judgement, children after age 6 years can receive a preventive care visit at 2-year intervals if specifically documented in the medical record as the plan of care.

<sup>&</sup>lt;sup>1</sup> Newborn Hearing Screen follow-up required for abnormal results. <sup>2</sup>Continue HC measurement past 11 months for abnormal results